



ASC Utilization Report
State Form 49933 (R3/6-05)
Indiana State Department of Health
Acute Care

Status: Finalized

I. Center Identification

Organization Name: METRO SPECIALTY SURGERY CENTER

Street Address: 200 Missouri Ave Ste A

City: Jeffersonville

County: Clark

Administrator Name: Katie Arnold RN

Administrator Email: karnold@metrospecialty.com

ASC Web Address:

Fiscal Year: 2017

Accredited: Yes No

Name of Accrediting Body: Joint Commission

Deemed Status: Yes No

Corporate Tax Status: For Profit Non Profit

II. Identification of Surgical Resources

Number of operating rooms	2
Number of procedure rooms	2

III. Utilization Statistics

A. Total Patients and Procedures		
Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	2471	10939
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
27130	71	
27446	46	
29916	65	
64483	64	
29806	66	
29888	99	
29881	195	

29827	160
64721	47
62323	43

IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following a surgical encounter.	1
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